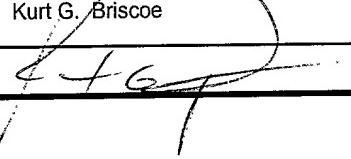
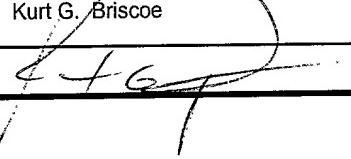
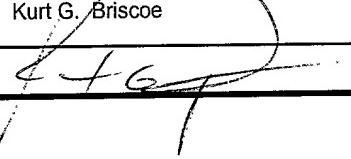


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02-12-01 A

PTO/SB/05 (08-00)

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	Beiersdorf 9265.5-KGB																																										
		First Inventor	HUBERT DORN ET AL																																										
		Title	NON-SYSTEMIC CONTROL OF PARASITES																																										
		Express Mail Label No.	EL 728910677 US																																										
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																																										
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>56</u>] (Preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Detailed Description of the Drawings (if filed) - Claim(s) - Abstract of the Disclosure</p> <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>1</u>]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>2</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (For continuation/divisional with Box 17 completed) i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed Statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63 (d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Forms (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>9. <input type="checkbox"/> Assignment Paper (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (When there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (If foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other <u>Appendix; Express Mail Certificate</u></p>																																											
ACCOMPANYING APPLICATION PARTS																																													
<p>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: <u>08/925,372</u> Prior application information: Examiner <u>A. Robinson</u> Group / Art Unit: <u>1616</u></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p style="text-align: center;">18. CORRESPONDENCE ADDRESS</p> <p><input type="checkbox"/> Customer Number or bar Code Label (Insert Customer No. or Attach bar code label here) or <input type="checkbox"/> Correspondence address below</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Name</td> <td colspan="5">Kurt G. Briscoe, Esq.</td> </tr> <tr> <td rowspan="2">Address</td> <td colspan="5">Norris McLaughlin & Marcus, P.A.</td> </tr> <tr> <td colspan="5">220 East 42nd Street - 30th Floor</td> </tr> <tr> <td>City</td> <td>New York</td> <td>State</td> <td>New York</td> <td>Zip Code</td> <td>10017</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>Telephone</td> <td>212-808-0700</td> <td>Fax</td> <td>212-808-084</td> </tr> <tr> <td>Name (Print/Type)</td> <td>Kurt G. Briscoe</td> <td>Registration No. (Attorney/Agent)</td> <td colspan="3">33,141</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date</td> <td colspan="2">February 9, 2001</td> </tr> </table>					Name	Kurt G. Briscoe, Esq.					Address	Norris McLaughlin & Marcus, P.A.					220 East 42 nd Street - 30 th Floor					City	New York	State	New York	Zip Code	10017	Country	USA	Telephone	212-808-0700	Fax	212-808-084	Name (Print/Type)	Kurt G. Briscoe	Registration No. (Attorney/Agent)	33,141			Signature			Date	February 9, 2001	
Name	Kurt G. Briscoe, Esq.																																												
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Bayer 9265.5-KGB

EXPRESS MAIL CERTIFICATE

“Express Mail” mailing label number EL 728910677 US

Date of Deposit February 9, 2001

I hereby certify that the following items:

- 1) Utility Patent Application Transmittal
 - 2) Fee Transmittal (Duplicate)
 - 3) Information Disclosure Statement
 - 4) Form PTO 1449 (3 Pages)
 - 5) Preliminary Amendment
 - 6) Combination Declaration & Power of Attorney (2 Pages)
 - 7) Application consisting of
 - a) Specification (Pages 1-49)
 - b) Claims (Pages 50-55)
 - c) Abstract (Last Page)
 - 8) Clean Copy of Claims as a Result of Preliminary Amendment
 - 9) Appendix

are being deposited with the United States Postal Services "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the: Hon. Commissioner for Patents, Washington, D.C. 20231, Box Patent Application.

NORRIS, McLAUGHLIN & MARCUS, P.A.

By

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 710.00)

Complete if Known

Application Number	Division of 08/925,372
Filing Date	HEREWITH
First Named Inventor	HUBERT DORN ET AL
Examiner Name	TO BE ASSIGNED
Group Art Unit	TO BE ASSIGNED
Attorney Docket No.	Bayer 9265.5-KGB

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number NORRIS, McLAUGHLIN & MARCUS, P.A.
Deposit Account Name 14-1263

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)		
101 710	201 355	Utility filing fee	710.		
106 320	206 160	Design filing fee			
107 490	207 245	Plant filing fee			
108 710	208 355	Reissue filing fee			
114 150	214 75	Provisional filing fee			

SUBTOTAL (1) (\$ 710.)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
6	-20** = 0	x 18	= 0
1	-3** = 0	x 80	= 0
Multiple Dependent			= 0

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
103 18	203 9	9	Claims in excess of 20
102 80	202 40	40	Independent claims in excess of 3
104 270	204 135	135	Multiple dependent claim, if not paid
109 80	209 40	40	** Reissue independent claims over original patent
110 18	210 9	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

*or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Description	
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 390	216 195	Extension for reply within second month	
117 890	217 445	Extension for reply within third month	
118 1,390	218 695	Extension for reply within fourth month	
128 1,890	228 945	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,240	241 620	Petition to revive - unintentional	
142 1,240	242 620	Utility issue fee (or reissue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	
179 710	279 355	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

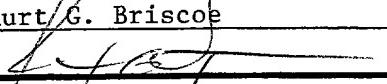
Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0)

SUBMITTED BY

Complete if applicable

Name (Print/Type)	Kurt G. Briscoe	Registration No (Attorney/Agent)	33,141	Telephone	(212) 808-0700
Signature				Date	February 9, 2001

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